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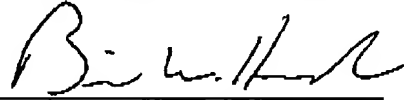
JUN 11 2007

Certification under 37 CFR 1.8b

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being facsimile transmitted to the U.S. Patent and Trademark Office to Fax No. (571-273-8300 on June 11, 2007.

Brian W. Hameder

Name



Signature

DOCKET: CU-2571

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: ANZA AB

SERIAL NO: 09/868,526

FILED: June 19, 2001

TITLE: TOOL HANDLE

)
)
) Group Art Unit:
)
) Examiner:

Office of PCT Legal Administration
Commissioner for Patents
Mail Stop PCT
P.O. Box 1450
Alexandria, VA 22313-1450

Attn: Mr. George Dombroske
PCT Legal Examiner

RESUBMISSION OF DECLARATION IN A RENEWED PETITION TO REVIVE AN
UNINTENTIONALLY ABANDONED APPLICATION UNDER 37 CFR 1.137(b)

Sir:

Following a telephone call from Mr. George Dombroske, the Applicant hereby re-submits a copy of the declaration, a complete copy of which is missing from USPTO records. The declaration re-submitted today was originally submitted on November 29, 2004. If any other documentation is needed, please contact the undersigned attorney.

Respectfully submitted,

June 11, 2007

Date



Attorney for Applicants
Brian W. Hameder, Reg. No. 45613
c/o Ladas & Parry LLP
224 South Michigan Avenue
Chicago, Illinois 60604
(312) 427-1300

Practitioner's Docket No. CU-2571**PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**In re application of: Stefan CARLSSON et al.For: TOOL HANDLE

the specification which:

(check and complete (a), (b) or (c))

- (a) ☐ is attached hereto.
- (b) ☒ was filed on June 19, 2001 as Application No. 09 / 868, 526 and was amended on _____ (if applicable).
- (c) ☐ was described and claimed in International Application No. _____ filed on _____ and as amended on _____ (if any).

PROOF OF AUTHORITY OF ADMINISTRATOR(TRIX), EXECUTOR(TRIX) OR LEGAL REPRESENTATIVE(S)

The declaration for the above identified application was signed on behalf of the

☒ deceased☐ incapacitatedInventor Stefan Carlsson

(type or print name of deceased or incapacitated inventor)

by _____

(type or print name(s) of administrator(trix), executor(trix) legal representative, or all heirs)

Attached is

(check and complete (d) or (e))

- (d) ☐ a certificate of the clerk of a competent court or the register of wills that the appointment of the signatory is still in force and effect.
- (e) ☒ a certificate from the appropriate court that they are all the heirs and that the estate did not require the appointment of an administrator or that they have the authority corresponding to that of an administrator or heir.

(also check and complete (f) and/or (g), if applicable)

- (f) ☒ The court papers mentioned above are not in English. An English translation of such papers are also attached.

NOTE: The translation need not be sworn or affirmed. MPEP § 409.01(a).

- (g) ☐ A consular officer of the United States has authenticated the signature of the foreign officer attesting to the papers submitted as proof of authority.

(Proof of Authority of Administrator(trix), Executor(trix) or Legal Representative(s)) [1-8]—page 1 of 2)

Date: 11/29/2004

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Brian W. Hamer

SIGNATURE OF PRACTITIONER

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(Type or print name of practitioner)

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(Proof of Authority of Administrator(s), Executor(s) or Legal Representative(s) [1-8]—page 2 of 2)

(Ref. 88-10/01 Pub. 605)

FORM 1-1

1-11

(check proper box(es) for any of the following added page(s)
that form a part of this declaration)

- ☐ **Signature** for fourth and subsequent joint inventors. *Number of pages added* _____

* * *

- ☒ **Signature** by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. *Number of pages added* 1

* * *

- ☒ **Signature** for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. *Number of pages added* 1

* * *

- ☐ Added page for **signature** by one joint inventor on behalf of deceased inventor(s) where legal representative cannot be appointed in time. (37 CFR 1.47)

* * *

- ☐ Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (C-I-P) application.

☐ Number of pages added _____

* * *

- ☐ Authorization of practitioner(s) to accept and follow instructions from representative.

* * *

(if no further pages form a part of this Declaration,
then end this Declaration with this page and check the following item)

- ☐ **This declaration ends with this page.**

(Declaration and Power of Attorney [1-1]—page 2 of 2)